



MARCH IS  
WOMEN'S HISTORY MONTH

# THE GRAPEVINE

U.S. NAVAL HOSPITAL  
OKINAWA, JAPAN



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A CONTINUING TRADITION OF  
SERVING WITH COMPASSION AND CARE

# CMC: Proud to be called “Shipmate”

CMDCM Christopher L. Hill, Command Master Chief, U.S. Naval Hospital Okinawa

Seven years ago, Pacific Fleet Master Chief Tom Howard was concerned about how the term “shipmate” had taken on a negative connotation among Sailors. So concerned, in fact, that he came up with a unique way to help restore the underlying sense of camaraderie, endearment and honor that the word once carried in the sea service.

According to Webster’s Dictionary, the term *shipmate* is defined as “a sailor who works or sails on the same ship as another sailor.”

Taking Webster’s definition a step further, your *shipmate* is your fellow Sailor. A peer. Someone who shares the same mission, fights the same battles, and endures the same hardships as you. A title you both earn through your accomplishments and contributions, starting from boot camp.

Somewhere along the line, the nuance of the word has changed. Over the years many Sailors have come to perceive *shipmate* as a derogatory term that implies failure and inferiority. I’ve even heard Sailors make jokes and throw the word around like an insult to the point that simply the tone of how the word is used in a sentence can imply different things. Hearing *shipmate* used in a disparaging or glib remark upsets me. While I’m quick to confront it, what upsets me



even more is how all of us as leaders are culpable through our own careless use of the term.

E. J. Jernigan, author of the book ***Tin Can Man*** wrote, “*Shipmate is an honorable word that is earned, not given. Being called a shipmate is the highest compliment one can earn in his life. Shipmate is a word equal to none in the English language. It is filled with courage, love, hate, duty, honor and country. It is a bond forged in storms, adversity and victory; and it is equaled only by a man’s love for his wife and family. It is formed at sea in a ship with a captain of character who causes can-do spirit to pass down the line; captain, to executive officer, to junior officers; chiefs, petty officers and crew.*”

I keep a copy of that quote in

my office to remind me to use that word carefully and to use it only with a positive connotation whenever I address another Sailor, regardless of rank or position. As leaders we must always remember to refer to our fellow Sailors (both up and down the chain) as our *shipmates* in a way that reflects positively and emphasizes the connection we have to each other.

FLTCM Howard’s effort to restore a positive implication to *shipmate* was an essay contest that got Navy-wide attention. Chief Aviation Electronics Technician Todd Brown, at the time assigned to the USS Carl Vinson, wrote the winning essay. Here is one of my favorite lines from his piece: “Shipmate’ is a term with inherent connotations of teamwork, camaraderie and belonging. It embodies duty, honor, courage, commitment and excellence. ‘Shipmate’ exclaims the spirited commonality of all Sailors: One Team! One Fight! It illustrates hardships shared, victories won. ‘Shipmate’ defines common purpose: ships, seas, defense of freedom. It carries echoes of war, heroes and the fallen. ‘Shipmate’ is a fire-hardened, selflessly earned title that boasts, “I am a United States Sailor!”

I hope the next time someone calls you shipmate, you find yourself standing a little taller and feeling a little prouder.

## MCCS Okinawa TOURS+ April Highlights

### Local Tours

- Forest Adventure Park, April 5
- Shrines & Gardens, April 5
- Hiji Falls & Okuma, April 6, 26
- Expo Park & Aquarium, April 6
- Bios on the Hill, April 7
- Pizza in the Sky & Nakajin Castle, April 11
- Strawberry Picking, April 12

### Off Island Tours

- YYY Resort Lily Festival Getaway, April 19-20
- Tokyo Disneyland, May 22 –26
- Hiroshima Tour, May 23—26
- Sumo Wrestling, May 22—26

The TOURS+ office at USNHO, located near the Chaplain’s office, is now open Monday through Friday from 9:00 a.m. to 5:00 p.m. Call 646-7013 (or the main office at 646-3502) for more information.

# Chaps: Heroes not always in the history books

Lieutenant Commander Russell A. Hale, Command Chaplain, U.S. Naval Hospital Okinawa

March is Women's History Month; a thirty-one day celebration of the historical contributions of women. I was thinking the other day about famous and influential women and came to the conclusion that outside of the Christian & Jewish scriptures, all of the influential women I've known have not been famous; rather, they have been family members and friends.

For example, my maternal grandmother, the daughter of an itinerant share cropper, was born in a covered wagon somewhere near the Oklahoma/Texas border in 1923. As a young girl, she made it through the Great Depression and survived the Oklahoma dust bowl; she was married as a young teen to another teenaged coal miner, and she worked as "Rosie the Riveter" in the California shipyards as she raised five children by herself while my grandfather served in the U.S. Army in the Pacific during WWII. After the war, she played lead guitar in an all-women's country music group and knew every Hank Williams song by heart (I can still hear play on her red Gibson Telecaster and sing "I'm So Lonely I Could Cry"). One of my most fond memories is from a time in my youth that my brother and I spent with her learning to bass fish with a cane pole and chew plug tobacco. Yes, she could chew and spit with the best of them! That sounds funny today (some of you are even appalled!) after all, we know the dangers of tobacco use and its negative health effects. But



for someone born with an Irish father and Cherokee mother in the early twentieth-century, before television was invented, well, that's just the way things were.

Today, most historical research on female movers and shakers is fairly recent. I Googled "Most influential women in history" and got names like Oprah, Miley, Fergie, and Madonna. Surprising enough, Mary, Mother of Jesus was not on most of the lists, neither was Mother Theresa. I was a little sad that the majority of the women listed were entertainers- I guess in our nation today we believe that popularity is somehow synonymous with influence. In reality, however, that is not true. Guess what names were missing from the lists on Yahoo OMG! and Google? Besides Dortha Pittser (my grandma mentioned above), also absent were Capt. Swap, Capt. Kascak, Cmdr. Beard, Lt. Cmdr. Braybrook, Lt. Anderson, Lt. j.g. Aclese, Ens. Rossetti, HMCM Rebana, HMCS Wood, HMC Valiente, NC1 Marshall, IT2

King, HM3Jimenez, HN Hubler, HA Bruman, Mrs. Peterson, etc. (All of you are on the list in my heart!) None of the women who work at USNH, who make & influence history everyday were included on any of these lists. Yet the truth is that the real history makers are the ones not in the history books, nor listed on the gossip websites. No, it is the unsung women who work every day as mothers, doctors, teachers, nurses, lawyers, military officers and enlisted, pilots, and technicians: the list goes on *ad infinitum*.

It is you, ladies, and ordinary women like you, doing extraordinary things every single day that make history happen. And, I am thankful for each of you as you touch the world and impact the lives around you, especially mine.

## The Grapevine

An authorized command publication of U. S. Naval Hospital Okinawa, Japan

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Executive Officer

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## Got News?

If you have an event you would like covered, email us or give us a call at 646-7024. Send in your news, photos and stories to the USNH Okinawa Public Affairs Office at [nhokipao@med.navy.mil](mailto:nhokipao@med.navy.mil).

# USNHO seeks Command Ombudsmen

*Ms. Christine Peterson, U.S. Naval Hospital Okinawa Command Ombudsman*

**U**. S. Naval Hospital Okinawa is currently seeking volunteers for the role of Command Ombudsman.

The command Ombudsman serves as a liaison between the command and command families; keeps the command informed regarding the overall well-being of command families; and regularly communicates and distributes information to and from the command and command family members.

Applicant must be the spouse of a service member (officer or enlisted, active duty or reserve) currently assigned to the hospital. The ideal applicant will have experience with the



Navy lifestyle, good communication skills, and the desire to help others.

Responsibilities include information & referral, facilitating communication between the command and command families, sharing information about the Ombudsman program at meetings and functions, and providing support & assistance during disasters or crises. Time commitment is estimated to be approximately 10-20 hours per week.

For more information or to apply for the position, please send an email to:

[NHOKIOmbudsman@med.navy.mil](mailto:NHOKIOmbudsman@med.navy.mil) or call 646-7318.

## USO Show Troupe visits USNHO March 11



# CgOSC: Shipmates looking out for shipmates

Lieutenant Commander Jason Duff, U. S. Naval Hospital Okinawa Mental Health Department

Greetings, USNHO! I am writing today to highlight the Caregiver Occupational Stress Control (CgOSC) Program. CgOSC is all about shipmates looking out for shipmates. The reason this concept is so important is because those who are suffering from stress injuries are often the last to know.

CgOSC is a comprehensive program that is designed to prevent the detrimental effects of both acute and chronic stress. Unmanaged or mismanaged stress can invariably lead to staff and unit burnout, compassion fatigue, interpersonal problems, impaired patient-staff interactions and de-



creased productivity.

CgOSC is intended to preserve and enhance the psychological health of USNHO staff on their mission of providing quality family-centered healthcare. We accomplish this dynamic support of our caregivers through outreach programs, educational briefs, individual assessment, emergency management, referrals to appropriate resources and onsite unit support.

Although shipmates looking out for shipmates is not a novel idea, we try to be novel in our approach by finding creative ways to have some fun now and then. We have employed the use of sumo suits, yoga instructors, musicians and even a massage therapist at hospital CgOSC events. We have worked with Doggies, Inc. and

hope to team up with the USO and the Healing Arts Club in the future.

One outreach program that we often employ is the “Coffee Break”, where members of CgOSC team go out as a group to visit hospital staff in their work-



spaces. The 10-15 minute break that our visit allows serves as a simple respite for the staff as well as a reminder that we care about our shipmates. During these “Coffee Breaks” we frequently come across an individual who will say, “Hey, Shipmate... do you have a second?” That request for a “second” can come from a peer, a junior Sailor, someone senior, or even a colleague from another service. No matter who it is, we will break off from the group and provide the individual that “second” they requested. At times it is merely a simple inquiry, perhaps a 5-10 minute discussion that provides support or clarity



and normalizes their stressful experience. It could be to schedule a time to sit down over a cup of coffee to just vent about occupational or life stressors. Other times it may be a request that

warrants a more formal mental health intervention.

When stress is not mitigated, managed, or removed it can pull us away from previously effective means of managing our lives. Sometimes we all need reminders to focus on the positive aspects of our lives. We should all encourage our shipmates to stay connected (or re-connect) with the people, places and things that have supported them in the past.

As clearly stated in the CgOSC doctrine, “Leaders at all levels are responsible for preserving the psychological health of their Marines,



Sailors, and family members, just as they are responsible for preserving their physical health.” If we are to truly place value on the psychological health of our shipmates we must consistently practice engaged deck plate leadership. As leaders we must know our people and be able to know normal in order to identify the abnormal so we may effectively respond when our shipmates are at risk of psychological injuries and illness.

CgOSC continually aims to strengthen unit cohesion, preserve individual well-being, enhance individual and unit resilience and maintain mission readiness.

For more comprehensive information on CgOSC and COSFA please visit: Naval Center for Combat & Operational Control (NCCOSC) at [www.med.navy.mil/sites/nmcscd/nccosc/Pages/welcome.aspx](http://www.med.navy.mil/sites/nmcscd/nccosc/Pages/welcome.aspx).

# GREAT WOMEN IN AMERICAN HISTORY



1

VICE ADMIRAL  
MICHELE HOWARD



2

AMELIA EARHART



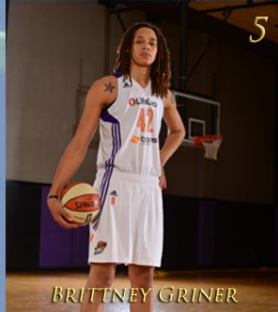
3

SARAH PALIN



ANN BANCROFT

4



5

BRITTNEY GRINER



6

CONDOLEEZZA RICE



7

ELIZABETH  
BLACKWELL



ERNESTINE SHEPHERD

8



9

LT. GEN. PATRICIA HOROHO



10

DIANA NYAD



11

SANDRA DAY O'CONNOR



12

SALLY RIDE



CLARA BARTON

13



14

MARGARET GORMAN

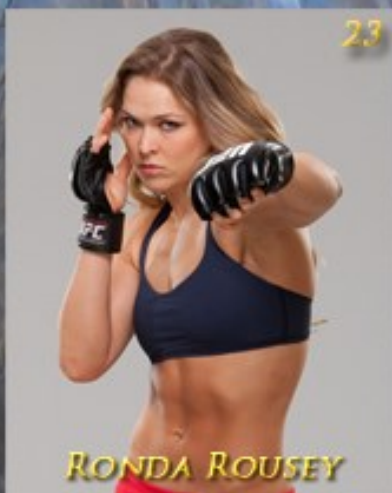
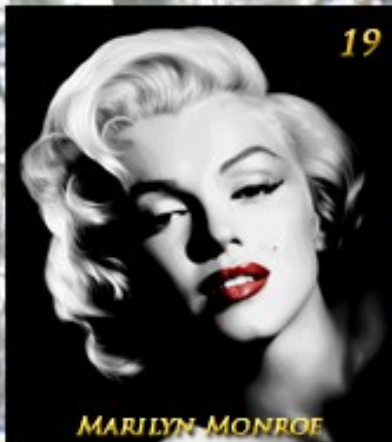


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DANICA PATRICK

RESEARCH & LAYOUT BY MASS COMMUNICATIONS SPECIALIST 3RD CLASS WILLIAM G. MCCANN

# GREAT WOMEN IN AMERICAN HISTORY



...LEGEND ON PAGE 8

# GREAT WOMEN IN AMERICAN HISTORY

LEGEND FROM PAGES 6 & 7

1. VICE ADM. MICHELE HOWARD - FIRST FEMALE U.S. NAVY 4 STAR ADMIRAL
2. AMELIA EARHART - FIRST FEMALE AVIATOR TO FLY SOLO ACROSS THE ATLANTIC OCEAN
3. SARAH PALIN - FIRST REPUBLICAN U.S. VICE PRESIDENT NOMINEE
4. ANN BANCROFT - FIRST WOMAN TO SUCCESSFULLY FINISH EXPEDITIONS TO THE ARTIC AND ANTARTIC
5. BRITTNEY GRINER - FIRST NCAA BASKETBALL PLAYER TO SCORE 2,000 POINTS AND BLOCK 500 SHOTS
6. CONDOLEEZZA RICE - FIRST AFRICAN AMERICAN FEMALE SECRETARY OF STATE
7. ELIZABETH BLACKWELL - FIRST WOMAN TO RECIEVE A MEDICAL DEGREE IN THE UNITED STATES
8. ERNESTINE SHEPHERD - OLDEST FEMALE COMPETETIVE BODY BUILDER, AGE 75
9. LT. GEN. PATRICIA HOROHO - FIRST FEMALE U.S. ARMY SURGEON GENERAL
10. DIANA NYAD - FIRST PERSON TO SWIM FROM CUBA TO FLORIDA
11. SANDRA DAY O'CONNOR - FIRST FEMALE SUPREME COURT JUSTICE
12. SALLY RIDE - FIRST AMERICAN WOMAN IN SPACE
13. CLARA BARTON - FOUNDER OF THE AMERICAN RED CROSS
14. MARGARET GORMAN - FIRST MISS AMERICA
15. DANICA PATRICK - THE MOST SUCCESSFUL WOMAN IN THE HISTORY OF AMERICAN OPEN-WHEEL RACING
16. SERENA WILLIAMS - THE REIGNING FRENCH OPEN, US OPEN, WTA TOUR CHAMPIONSHIPS AND OLYMPIC LADIES SINGLES CHAMPION
17. GENERAL ANN DUNWOODY - FIRST WOMAN IN U.S. MILITARY HISTORY TO ACHIEVE A FOUR-STAR OFFICER RANK
18. MICHELE OBAMA - FIRST AFRICAN AMERICAN FIRST LADY OF THE UNITED STATES
19. MARILYN MONROE - ONE OF THE MOST FAMOUS AND SUCCESSFUL ACTRESSES OF ALL TIME
20. THE SACRED TWENTY - FIRST WOMEN TO FORMALLY SERVE IN THE UNITED STATES NAVY REPRESENTING THE NURSE CORPS
21. ANNIE TAYLOR - FIRST PERSON TO GO OVER NIAGARA FALLS IN A BARREL AND SURVIVE
22. GABRIELLE DOUGLAS - FIRST AFRICAN-AMERICAN GYMNAST IN OLYMPIC HISTORY TO BECOME THE INDIVIDUAL ALL-AROUND CHAMPION GOLD MEDALIST
23. RONDA ROUSEY - FIRST AND CURRENT ULTIMATE FIGHTING CHAMPIONSHIP WOMEN'S BANTAMWEIGHT CHAMPION
24. MARGARET SMITH - FIRST WOMAN NOMINATED FOR PRESIDENT OF THE UNITED STATES
25. ELIZABETH STANTON - INITIATED THE FIRST ORGANIZED WOMEN'S RIGHTS AND SUFFRAGE MOVEMENTS IN THE UNITED STATES
26. SENATOR HILLARY CLINTON - FIRST WOMAN IN U.S. HISTORY TO WIN A PRESIDENTIAL PRIMARY CONTEST

# (N)ICE Comments from Our Patients

ICE comments from our patients courtesy of Lieutenant Julie Anderson, U. S. Naval Hospital Okinawa Customer Relations Officer

I would like to commend **Lt. Cmdr. Hearty** for being so kind and considerate. He was so professional that I truly felt I was in the best hands anyone could ask for.

**Lt. Cmdr. Henninger** showed true concern for me from the moment I was rushed into the emergency room. I feel blessed to have had him be the one to assist me during my crisis.

Nurses Commendation - I'd like to thank my two nurses, **Ms. Ginez and Ms. Gayosso**. They were super accommodating and professional. They did their utmost to ensure my comfort despite all the pain I experienced

**Dr. Santiago** was very thorough and explained things in clear concise language. Great doctor!! We are fortunate to have him.

Thank you, **Mr. Kiyuna** for skillfully drawing my blood. I do not like needles and you made it painless and relatively pleasant.

**HM3 Glaze** was very courteous and professional. Thanks!

**Lt. Hayes** was very thorough and professional, great overall evaluation and experience.

**HN Barber** helped me with the PHA. Did it very thoroughly and was very professional

I just wanted to drop a line to thank the **Deployment Health Staff** for the service they provided me recently. From the junior staff member checking me in, to the doctor on staff, THANK YOU for not making me feel like a "number." Semper Fidelis.

I want to thank the chiropractor **Dr. Clifton** for working me into a very hectic schedule for treatment last week. He was super busy but still tended to my needs and that type of customer service was well above and beyond what I actually expected that day. Thank you Sir.

I hate going to the doctor, but **Lt. Ehram** makes it a positive experience. I have great confidence that I am in good hands and that I will get the care needed. Great job. Excellent service provided. Love her down to earth manner.

**Ms. Baker and Ms. Quinn** provided me with expedited referral care and excellent professionalism.

The **Optometry Department staff** was very courteous and professional from the time I checked in until I was finished.

**Lt. Cmdr. Brink and HM3 Greenberg** took exemplary care of me during a minor procedure. Patient centered, thorough, and accommodating. Dr. Brink and HM3 Greenberg are paragon of professionalism.

As always, great customer service by **HN Hubler** providing fast, quality assistance every time it is needed. Thank you Shipmate!

I would like to thank **HM3 Gibbs** for all the hard work in assisting me with my road to recovery at P.T. He is a very caring and professional P.T. Tech.

Thank you to **Lt. D. Ward** who took time with me to pre and post discuss the pain procedure. I was especially impressed with his professionalism and treatment of me as an intelligent patient. **HN Breau** was positive and helpful as well. Thank you for all you do.

I took my daughter to the **Emergency Department**... I don't remember the staff's names but everyone was really nice. My daughter felt comfortable while being examined. She was disappointed when we had to leave. She told me she wanted to eat pizza and ice cream with the doctor because he was nice!

**Lt. Cmdr. Laird** should be recognized for his dedication and commitment to his patients. He has gone above and beyond what is asked of him every time I see him.

**Lt. j.g. Tice** went out of his way to contact my doctor when computer service was down. Because of his help, I got the treatment I needed.

I would like to say thank you for all the help that I received. **Mr. M. Jones and HN Longrich** were really great, they help me a lot.

*EDITOR'S NOTE: Some of the ICE comments used in this article may have been edited for space and to ensure patient privacy.*

# Nutrition Month: Enjoy the taste of eating right

Lieutenant Pamela Gregory, U. S. Naval Hospital Nutrition Services

This March marks 33 years of promoting nutrition. 1973 was the first year and National Nutrition Month was known and promoted as National Nutrition Week with the first theme being "Invest in Yourself-Buy Nutrition". National Nutrition Week became widely popular and because of the great interest in nutrition and health, the House of Delegates called for an expansion of National Nutrition Week to National Nutrition Month beginning in 1980.

The Academy of Nutrition and Dietetics (formerly known as the American Dietetic Association) used this time period to successfully provide the public with sound nutrition information in a timely fashion. Several themes have been used over the 3 decades: "Improving Nutrition for the Nation Set the Pace!", "Take the Food Way for Good Nutrition"; "Hit your Stride....Eat Smart", "Everybody wins with Good Nutrition", "All Foods Can Fit", "Start Today for a Healthy Tomorrow". This year's theme is "Enjoy the Taste of Eating Right". Each year the theme has been used in different formats to promote nutrition and education about foods.

Over the years the Academy of Nutrition and Dietetics partnered with the food industries to help promote education and healthy eating, in addition to continuing to prompt food companies for clearer food labeling. Nutrition labels must have serving sizes,

how many servings contained within the package to include, calories from fat, sodium, carbohydrates, fiber, sugar and protein. In addition the label must state if the item contains common food allergies such

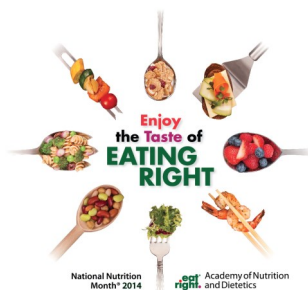
as soy, peanuts, milk, eggs and wheat.

Through the years, National Nutrition Month has remained true to its original purpose: "To increase the public's awareness of the importance of good nutrition and promote the position of the Academy of Nutrition and Dietetic members as the leading authorities in nutrition."

With the ever increasing use of the internet

people have access to information, be it right or wrong, faster and easier than ever before. Many people are in search of quick fixes for health concerns/problems. When in reality, the solution could just very well be in the types and amounts of foods they are currently eating. Every day there are dietitians around the world providing the latest information to patients and the public on how to manage chronic diseases such as elevated cholesterol, hypertension, obesity, diabetes and cancer to name a few. The leading expert on food and nutritional needs is a Registered Dietitian whose education has a focus in Health Science and Nutrition..

*References: Denny S. Journal of American Dietetic Association, March 2006, Vol 106.*



Knowing what to eat can be confusing. The information on the food label only helps when you know what you are looking for. Become food label savvy by following these simple strategies.

**Ingredients:** Reading the ingredient list is one way to ensure you are getting what you want when it comes to food and beverages. Lots of ingredients you cannot pronounce may actually mean more chemicals made in a lab rather than actual food. *Choose the least processed foods and foods with the fewest ingredients.*

**Portions:** Portions on packages are set by manufacturers and are not standardized. Restaurant portions can exceed recommended amounts by up to ten times! Use your plate as your guide. Fill half your plate with low calorie dense foods like fruit and vegetables, one quarter with wholesome grains and the final quarter with lean protein.

**Sodium:** Compare different brands and choose ones with lower sodium levels. *Keep sodi-*

*um levels at around 500 mg per meal or a total of 2400 mg, or 1500 mg for those over 50 or with high blood pressure.*

**Added Sugar:** Natural sugar found in fruit and milk is part of a healthful diet. Other added sugar is just empty calories. Did you know it is in cake and candy, but how about yogurt, tomato sauce and so-called healthy cereals? Four grams of sugar is to the equivalent to 1 teaspoon. *Aim for no more than no more than 10% of total calories from empty calories, or no more than 7 teaspoons per day for women and 9 teaspoons for men.*

**Solid Fat:** Solid fat is found in a lot of processed foods fried food, chips and baked goods. *Focus on plant-based fats like olive oil, nuts and avocado. Use only the amount needed to make food taste good. Cooking more at home makes this easy. An onion takes about 2 teaspoons of oil to cook. Be food savvy.*

Read label ingredients. Make informed choices. Enjoy fresh food!

# Preventing & treating ankle sprains

Lieutenant Matthew Wendt, Staff Orthopedic Surgeon, USNH Okinawa

**A**nkle sprains are one of the most common athletic injuries. The injury consists of a stretch or tear of the ligaments that hold the bones around the ankle in place. The most frequent type of ankle sprain involves injury to the lateral (outside) ankle ligaments (Figure 1). A sprain is usually caused by an inversion injury, or “rolling the ankle”.

Risk factors associated with ankle sprain are inappropriate shoe wear, irregular playing surfaces, cutting sports (basketball, football, soccer) and history of ankle sprains.

Common signs of an ankle sprain are pain, swelling and bruising on the outside side of the foot and ankle after a twisting or rolling injury. You may or may not be able to put weight on your foot after the injury. If the injured ankle is unable to bear weight, this may indicate a more severe injury and the injured person should seek medical attention.

Diagnosis of an ankle sprain can be made by a medical provider. Describing the history of the injury including which way the ankle was twisted is important. The medical provider first conducts a physical exam of the injured area, including inspection of the skin for bruising and swelling. The exam also includes feeling the foot and ankle for areas of tenderness. If there is concern of a more serious injury x-rays will be obtained to evaluate the bones around the ankle.

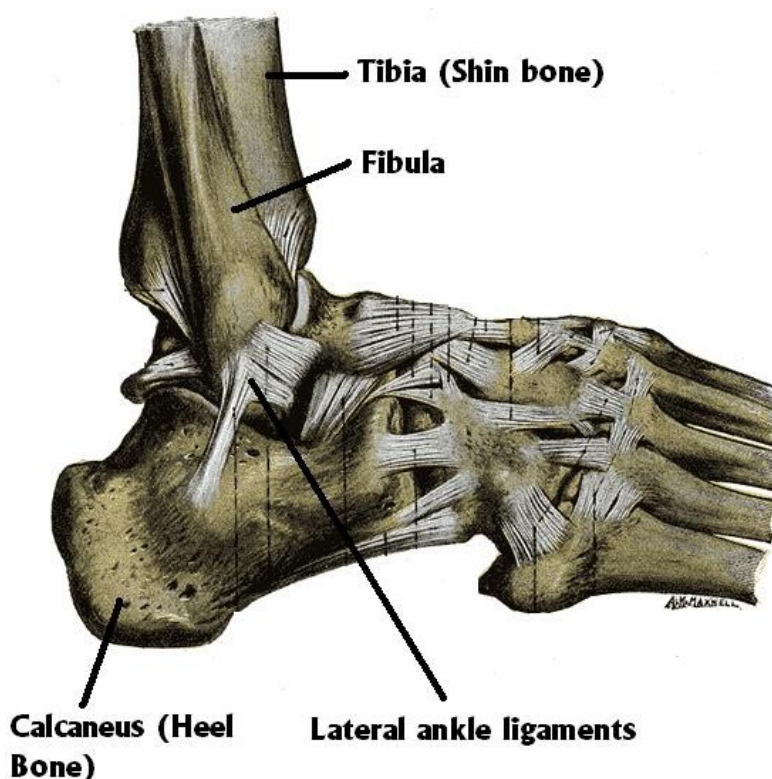
Treatment of most ankle sprains is based on relieving symptoms. Following the principles of RICE (rest, ice, compression, and elevation) will allow the ankle ligaments to heal and provide pain relief.

Medications such as Tylenol and anti-inflammatory medications such as Motrin or Naproxen can provide pain relief while the ankle heals. More severe injuries that are too painful to put weight on may require a short period of crutch use and immobilization in a walking boot or cast until the patient can walk normally. Some patients may be referred to physical therapy to help regain strength and mobility in the injured ankle. The provider may also provide a removable brace during

rehabilitation. A brace will not prevent further injury but it can aid recovery in order to return to play more quickly.

Fortunately, the vast majority of ankle sprains will heal within 2-4 weeks and do not require any surgical treatment.

Preventing all ankle sprains is impossible but



there are some key strategies to avoid placing yourself at greater risk:

- Always wear appropriate footwear – playing sports barefoot or in sandals needlessly increases the odds of an injury
- Play outdoor sports on designated fields to avoid an injury due to holes or obstacles on an ungroomed surface.
- Avoid overly aggressive or careless play in contact sports; it places everyone at risk.
- For those with a personal history of ankle sprains, wearing an over-the-counter lace-up brace can decrease the risk of re-injury and allow a quicker return to play.

Source: *DeLee & Drez's orthopaedic sports medicine: principles and practice* [edited by] Jesse C. DeLee, David Drez, Mark D. Miller. –3rd ed.

\*Illustration courtesy of a public domain edition of *Gray's Anatomy*

## Events & Milestones



*Personnel of the Year, CY 2014, and Personnel of the Quarter recognition ceremony, March 7.*



**ABOVE LEFT:** Veterans of Foreign Wars (VFW National Commander-in-Chief William Thein at a luncheon with USNHO Sailors and local VFW members. **ABOVE RIGHT:** Hospital Apprentice Dakota Jenkins simulates a field medical procedure on simulated casualty Hospitalman Carl Rys during a tactical combat casualty care demonstration for Maj. Gen. Akira Kawasaki, Commanding General of Kyushu Depot, Western Army of the Japanese Ground Self Defense Force during a tour of U.S. Naval Hospital Okinawa.



**USNHO CPOs and First Class Petty Officers at a community relations project at the Airen En Children's Home in Nishihara Feb. 27. BELOW RIGHT:** Removing a stump from the grounds of the Airen En Children's Home



*Monthly command awards ceremony, March 6.*

